PTO/SB/22 (10-00) Approved for use through 10/31/2002. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE perwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Docket Number (Optional)** ION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) 72611-003 In re Application of Ahmad Fakheri Application Number Filed 10/748,636 12/30/2003 Finned Helicoidal Heat Exchanger Examiner Group Art Unit 3753 Leonard A. Leo This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate non-small-entity fee are as follows (check time period desired): One month (37 CFR 1.17(a)(1)) \$ 120.00 08/02/2005 CNGUYEN2 00000019 10748636 Two months (37 CFR 1.17(a)(2)) \$ 450.00 01 FC:2251 60.00 OP Three months (37 CFR 1.17(a)(3)) \$1,020.00 Four months (37 CFR 1.17(a)(4)) \$1,590.00 Five months (37 CFR 1.17(a)(5)) \$2,160.00 Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$\_\_\_\_\_60.00 A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-3460 I have enclosed a duplicate copy of this sheet. I am the applicant/inventor assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number 45,437. attorney or agent under 37 CFR 1:34(a). Registration number if acting under 37 CFR 1.34(a)\_ WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTQ-2038. Signature Robert C. Haldiman, 45,437 309-497-3249 Telephone Number Typed or Printed Name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of \_\_\_\_\_\_ forms are submitted.